

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	1						51						
2		1					52						
3		2					53						
4		2					54						
5		①					55						
6		①					56						
7		1					57						
8		1					58						
9		3					59						
10		①					60						
11	1						61						
12		1					62						
13		1					63						
14		3					64						
15		3					65						
16		1					66						
17		1					67						
18	1						68						
19		1					69						
20		1					70						
21							71						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	25						TOTAL DEP.						
TOTAL CLAIMS	28						TOTAL CLAIMS						